Printed on: 5/27/2010 11:42:33 PM

National Transportation Safety Board	NT	ΓSB ID:	ERA10RA09	97	Aircraft Registration Number: N28RK					
FACTUAL REPORT	Oc	ccurrence	e Date: 12/17	7/2009	Most Critical Injury: Fatal					
AYIATION	ccurrence	e Type: Accid	lent	Investigated By: Foreign						
Location/Time										
Nearest City/Place	State	e Zip Code		Local Time	Time Zone	ime Zone				
Matthew Town			1922		EST					
Airport Proximity: Off Airport/Airstrip	From La	nding Facility:								
Aircraft Information Summary										
Aircraft Manufacturer			Model/Series	5			Type of Aircraft			
DASSAULT/SUD	FALCON 2	0	Airplane							
Revenue Sightseeing Flight:		Air Medical Transport Flight:								

Narrative

Brief narrative statement of facts, conditions and circumstances pertinent to the accident/incident:

On December 17, 2009, about 1922 eastern standard time, a Dassault Falcon 20, N28RK, crashed in a remote area approximately 12 miles east of Matthew Town, Inagua, Bahamas. The 2 pilots were killed and the airplane was destroyed. Night, visual meteorological conditions prevailed. The flight originated at Santo Domingo, Dominican Republic (MDJB) at an undetermined time and was destined for Fort Lauderdale, Florida (KFXE).

The investigation is under the jurisdiction of the Bahamian Government. Further information pertaining to this accident may be obtained from:

Manager of Flight Standards, Bahamas

P.O. Box AP 59244

Nassau, N.P. Bahamas Phone: (242) 377-3445/3448

Facsimile: (242) 377-6060

This report is for information purposes only, and contains only information released by or obtained for the Bahamian Government.

Updated on Jan 13 2010 10:51AM

National Transportation Safety Board FACTUAL REPORT AVIATION

NTSB ID: ERA10RA097

Occurrence Date: 12/17/2009

AVIATION	rence Type	e: A	ccident											
Landing Facility/Approach In	formation	Į.												
Airport Name		1	Airport ID:	A					Runway Length			vay Width		
					Ft. MSL	N/A								
Runway Surface Type:														
Runway Surface Condition:														
Approach/Arrival Flown: NONE	Ē													
VFR Approach/Landing: None														
Aircraft Information														
Aircraft Manufacturer DASSAULT/SUD			Mode FAL						Serial 206	Numbe	er			
Airworthiness Certificate(s):							•							
Landing Gear Type: Retractable	- Tricycle													
Amateur Built Acft? No	Certifi	ed M	lax Gross Wt.	LBS Numbe			er of Er	: 2						
Engine Type:	Engine M	Engine Manufacturer: Model/Series:								ed Power:				
- Aircraft Inspection Information														
Type of Last Inspection Da			Date of La	Date of Last Inspection Time S				ection Ho	Airframe Total Time Hours					
- Emergency Locator Transmitter (ELT) Information				[
ELT Installed?/Type			ELT Operated? ELT Aided in Locatin						ing Accident Site?					
Owner/Operator Information														
Registered Aircraft Owner					Street Address 299 SOUTH MAIN ST 12TH FLOOR									
WELLS FARGO BANK NORT	HWEST NA TRUS	STEE	City SALT LAKE CITY							Stat	te	Zip Code		
				Addr	UT		84111							
Operator of Aircraft														
	City								te	Zip Code				
Operator Does Business As:	-			Ol	perator Desig	nator Co	ode:							
- Type of U.S. Certificate(s) Held:	None													
Air Carrier Operating Certificate(s)	:													
Operating Certificate:					Operator Certific	cate:								
Regulation Flight Conducted Unde	r: Part 91: Genera	ıl Aviati	on											
Type of Flight Operation Conducted	d: Positioning													
]	FACTU	JAL REP	ORT	- AVIATION							Page 2		

National Transportation Safety Board FACTUAL REPORT AVIATION

NTSB ID: ERA10RA097

Occurrence Date: 12/17/2009

AVIATION					Occurrence Type: Accident												
First Pilot	t Information	Mini		_													
Name	- Information						С	City					St	ate	Dat	te of Birth	Age
Sex: Seat Occupied: Occupational Pilot? Certificate Number:																	
Certificate(s):											•					
Airplane Ra	ating(s):						_										
Rotorcraft/0	Glider/LTA:																
Instrument	Rating(s):			_													
Instructor F	Rating(s):																
Current Bie	ennial Flight Revie	∍w?															
Medical Ce	ert.:	Medica	al Cert. Sta	atus:	:							Date of La	ast N	/ledical E	Exan	n:	
							_										
- Flight Tim	Flight Time Matrix All A/C This Make and Model s			Airplane Single Engine	Airplane Mult-Engine	\prod	Night		Actual	Instrum	nent Simulated		Rotorcraft		Glider	Lighter Than Air	
Total Time				\Box			floor		\Box								
Pilot In Cor	mmand(PIC)			\Box													
Instructor		<u> </u>		\perp			\perp		\sqcup				\Box				
Instruction	Received	<u> </u>		\perp			\perp										
Last 90 Da	ys	<u> </u>	<u> </u>	\dashv			\perp		\dashv				_				
Last 30 Day	ys	<u> </u>		\perp			4		\dashv				_				
Last 24 Ho	urs	<u> </u>	<u></u>	丄			丄		丄					—			
Seatbelt Us	sed?	Shou	ulder Harne	ess l	Used?			Tox	xico	ology Pe	erform	ned?		s	ecor	nd Pilot? Ye	s
Flight Pla	n/Itinerary																
Type of Flig	ght Plan Filed: IF	R															
Departure I	Point						_	St	State Airport Id			rt Identifier Departui			arture	e Time	Time Zone
Santo Do	mingo								MDJB								
Destination	1							St	State Airport Identifier								
Fort Lauderdale FL FXE																	
Type of Cle	earance: IFR																
Type of Air	space:																
Weather	Information																
Source of	Wx Information:																
							_										
				7	FACTUAL	REPORT	· _	AVIATI	ION	J							Page 3

National Transportation Safety Board FACTUAL REPORT

NTSB ID: ERA10RA097

Occurrence Date: 12/17/2009

	Occ	Occurrence Type: Accident												
Weather	AVIATION Information		· ·											
WOF ID	Observation Time	Time Zone	WOF	Elevation		WOF D	Distance Fron	n Accid	dent Site		Direction From /	Accident Site		
	Ft. MSL								NM D					
Sky/Lowes	st Cloud Condition:						Ft. AG	SL.	Condition of Light: Night					
Lowest Ce	eiling:	ng: Ft. AGL Visibility:							SM Altimeter:					
Temperati	perature: °C Dew Point: °C Weather Conditions at Accident Sit							Site: Visual	Conc	litions				
Wind Direc	ction:	Wind Sp	peed:	 		Win	nd Gusts:							
Visibility (F	RVR): Ft.	Visibility	y (RVV)	S	м									
Precip and	d/or Obscuration:	'												
Accident	Information													
	Information			(1 - - - - - - - - - -					A	-1:-				
	Information mage: Destroyed		Airci	raft Fire: C	Groun	nd			Aircraft Exp	olosio	n			
			Airci	raft Fire: (Groun	nd			Aircraft Exp	olosio	n			
Aircraft Da		Fatal	Airci	raft Fire: C		nd None	TOTAL		Aircraft Exp	olosio	n			
Aircraft Da	mage: Destroyed	Fatal 1					TOTAL 1		Aircraft Exp	olosio	n			
Aircraft Da	mage: Destroyed mmary Matrix						+		Aircraft Exp	olosio	n			
Aircraft Da - Injury Su First P	mage: Destroyed mmary Matrix ilot d Pilot	1					1		Aircraft Exp	olosio	n			
- Injury Su First P Second	mage: Destroyed mmary Matrix ilot d Pilot	1					1		Aircraft Exp	olosio	n			
- Injury Su First P Second	mage: Destroyed mmary Matrix illot d Pilot nt Pilot nstructor	1					1		Aircraft Exp	olosio	n			
- Injury Su First P Second Studer Flight I Check	mage: Destroyed mmary Matrix illot d Pilot nt Pilot nstructor	1					1		Aircraft Exp	olosio	n			
- Injury Su First P Secon Studer Flight I Check	mmary Matrix ilot d Pilot nstructor Pilot	1					1		Aircraft Exp	blosio	n			
- Injury Su First P Secon Studer Flight I Check	mage: Destroyed mmary Matrix ilot d Pilot nstructor Pilot Engineer Attendants	1					1		Aircraft Exp	blosio	n			
- Injury Su First P Second Studer Flight I Check Flight B Cabin A	mmary Matrix filot d Pilot nstructor Pilot Engineer Attendants Crew	1					1		Aircraft Exp	blosio	n			
- Injury Su First P Second Studer Flight I Check Flight E Cabin A Other C	mmary Matrix filot d Pilot nstructor Pilot Engineer Attendants Crew	1					1		Aircraft Exp	blosio	n			
- Injury Su First P Second Studer Flight I Check Flight I Cabin I Other (Passer	mage: Destroyed mmary Matrix illot d Pilot nstructor Pilot Engineer Attendants Crew	1					1 1		Aircraft Exp	blosio	n			

National Transportation Safety Board

NTSB ID: ERA10RA097

Tuttonal Transportation Surety Board		
FACTUAL REPORT	Occurrence Date: 12/17/2009	
FACTUAL REPORT AVIATION	Occurrence Type: Accident	
Administrative Information	1	
Investigator-In-Charge (IIC)		
Ralph E. Hicks		
Additional Persons Participating in This Accident/Incid	lent Investigation:	